



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities:

Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project: “*TeamSTEPPS 2.0 Online Master Trainer Course*.” In accordance with the Paperwork Reduction Act of 1995, Public Law 104-13 (44 U.S.C. 3506(c)(2)(A)), AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by (INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER).

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by email at doris.lefkowitz@ahrq.hhs.gov.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT: Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email at doris.lefkowitz@ahrq.hhs.gov.

SUPPLEMENTARY INFORMATION:

Proposed Project

TeamSTEPPS 2.0 Online Master Trainer Course

As part of its effort to fulfill its mission goals, AHRQ, in collaboration with the U.S. Department of Defense's TRICARE Management Activity, developed TeamSTEPPS® (aka, Team Strategies and Tools for Enhancing Performance and Patient Safety) to provide an evidence-based suite of tools and strategies for training teamwork-based patient safety to health care professionals. TeamSTEPPS includes multiple tool-kits, which are all tied to or are variants of the core curriculum. TeamSTEPPS resources have been developed for primary care, rapid response systems, long-term care, and patients with limited English proficiency.

The main objective of the TeamSTEPPS program is to improve patient safety by training health care staff in various teamwork, communication, and patient safety concepts, tools, and techniques and ultimately helping to build national capacity for supporting teamwork-based patient safety efforts in health care organizations. Since 2007, AHRQ's National Implementation Program has produced (and continues to produce) Master Trainers who have stimulated the use and adoption of TeamSTEPPS in health care delivery systems. These individuals were trained during two-day in-person classes using the TeamSTEPPS core curriculum at regional training centers across the U.S. AHRQ has also provided technical assistance and consultation on implementing TeamSTEPPS and has developed various channels of learning (e.g., user networks, various educational venues) for continued support and the improvement of teamwork in health care. Since the inception of the National Implementation Program, AHRQ has trained more than 5,000 participants to serve as TeamSTEPPS Master Trainers.

Despite the success of the National Implementation program and the availability of training through this initiative, AHRQ has been unable to match the demand for TeamSTEPPS Master Training. Wait lists for training often exceed 500 individuals at any given time.

To address this prevailing need, AHRQ has launched an effort to develop and provide TeamSTEPPS training online. This program, known as TeamSTEPPS 2.0 Online Master Trainer course, will mirror the TeamSTEPPS 2.0 core curriculum and provide equivalent training to the in-person classes offered through the National Implementation Program.

As part of this initiative, AHRQ seeks to conduct an evaluation of the TeamSTEPPS 2.0 Online Master Trainer program. This evaluation seeks to understand the effectiveness of TeamSTEPPS 2.0 Online Master Training and what revisions might be required to improve the training program.

This research has the following goals:

- (1) Conduct a formative assessment of the TeamSTEPPS 2.0 Online Master Trainer program to determine what improvements should be made to the training and how it is delivered, and
- (2) Identify how trained participants use and implement the TeamSTEPPS tools and resources.

This study is being conducted by AHRQ through its contractor, Reingold, Inc., pursuant to AHRQ's statutory authority to conduct and support research on health care and on systems for the delivery of such care, including activities with respect to the quality, effectiveness, efficiency, appropriateness, and value of health care services and with respect to quality measurement and improvement, 42 U.S.C. 299a(a)(1) and (2).

Method of Collection

To achieve this project's goals, AHRQ will train participants using the TeamSTEPPS 2.0 Online Master Trainer program and then survey these participants six months post-training. Each activity is briefly described below.

1. *TeamSTEPPS 2.0 Online Master Trainer Course*. This training program, which includes 13 accredited hours of training, is based on the TeamSTEPPS 2.0 instructional materials and will be delivered online to 3,000 participants. The training will cover the core TeamSTEPPS tools and strategies, coaching, organizational change, and implementation science.
2. *TeamSTEPPS 2.0 Online Post-Training Survey*. This online instrument will be administered to all participants who completed TeamSTEPPS 2.0 Online Master Training. The survey will be administered six months after participants complete the training.

This is a new data collection for the purpose of conducting an evaluation of TeamSTEPPS 2.0 Online Master Trainer program. The evaluation will be primarily formative in nature as AHRQ seeks information to improve the delivery of the training.

To conduct the evaluation, the TeamSTEPPS 2.0 Online Post-Training Survey will be administered to all individuals who completed the TeamSTEPPS 2.0 Online Master Trainer program six months after training. The purpose of the survey is to assess the degree to which participants felt prepared by the training and what they did to implement TeamSTEPPS. Specifically, participants will be asked about their reasons for participating in the program; the degree to which they feel the training prepared them to train others in and use TeamSTEPPS; what tools they have implemented in their organizations; and resulting changes they have observed in the delivery of care.

Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annualized burden hours for the respondent's time to participate in the study. The *TeamSTEPPS 2.0 Online Post-Training Survey* will be completed by approximately 3,000 individuals. We estimate that each respondent will answer 10 items (i.e., number of responses per respondent) and responding to these 10

questions will require 20 minutes. The total annualized burden is estimated to be 10,000 hours.

Exhibit 2 shows the estimated annualized cost burden based on the respondents' time to participate in the study. The total cost burden is estimated to be \$35,930.

Exhibit 1. Estimated Annualized Burden Hours

| Form Name | Number of respondents | Number of responses per respondent | Hours per response | Total burden hours |
|------------------------------------|------------------------------|---|---------------------------|---------------------------|
| Training participant questionnaire | 3,000 | 1 | 20/60 | 1,000 |
| Total | 3,000 | N/A | N/A | 1,000 |

Exhibit 2. Estimated Annualized Cost Burden

| Form Name | Number of respondents | Total burden hours | Average hourly wage rate* | Total cost burden |
|------------------------------------|------------------------------|---------------------------|----------------------------------|--------------------------|
| Training participant questionnaire | 3,000 | 1,000 | \$35.93 | \$35,930 |
| Total | 3,000 | 1,000 | N/A | \$35,930 |

*Based on the mean of the average wages for all health professionals (29-0000) for the training participant questionnaire and for executives, administrators, and managers for the organizational leader questionnaire presented in the National Compensation Survey: Occupational Wages in the United States, May 2012, U.S. Department of Labor, Bureau of Labor Statistics. www.bls.gov/oes/current/oes_nat.htm#37-0000

Request for Comments

In accordance with the Paperwork Reduction Act, comments on AHRQ's information collection are requested with regard to any of the following: (a) Whether the proposed collection of information is necessary for the proper performance of AHRQ health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ's estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the

Agency's subsequent request for OMB approval of the proposed information collection.

All comments will become a matter of public record.

Dated: May 6, 2014.

Richard Kronick,

AHRQ Director.

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